PATENT APPLICATION FEE DETERMINATION RECOI								Application or Docket Number					
Effective January 1, 2003										1	9[627	104
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALI TYPE	EN		OR	OTHER SMALL	
TOTAL CLAIMS			14				1	RAT	E	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			4 minus 20=		*			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		<u> </u>			X42=			OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT	<u>-</u>				+140=			OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column			column 2		TOTA	۹L		OR	TOTAL	750
91	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\										•	OTHER	THAN
'	<u>'</u>	(Column 1)	(Colum			(Column 3)		SMALL ENTITY		OR	SMALL ENTITY		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 14	Minus	**~	20	2		X\$ 9	=		OR	X\$18=	
AME	Independent	• 3	Minus	###	3	- /		X42:	=	-	OR	X84=	
Ш	FIRST PRESE	NTATION OF MI	JULIPUE DE	ENUEN	CLAIM	_/		+140)=		OR	+280=	
							1	TO ADDIT, F			OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)	_ ′		ا تنان			ravin FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=]]	X\$ 9	=		OR	X\$18=	
AME	Independent	NITATION OF MI	Minus	***	CLAIL	=			=		OR	X84=	
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ا ا	+140	=		OR	+280=	
							[TO		:	OR	TOTAL	
		(Column 1)		(Cale	mn 3)	(Column 3)	,	ADDIT. F	EE			ADDIT. FEE	
		CLAIMS		(Colur HIGH	IEST	(Column 3)	1 1			ADD:	ì		400:
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	Ę	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
	Independent	•	Minus	***		=	1	X42=			OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											 	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE										OR	TOTAL ADDIT. FEE		
	The *Highest Nun	nber Previously Pa	id For" (Total o	Independ	ent) is the	highest number	er tou	ind in the	e app	propriate bo	x in co	lumn 1.	